

**IN THE CIRCUIT COURT OF THE SEVENTH JUDICIAL CIRCUIT,
IN AND FOR VOLUSIA COUNTY, FLORIDA**

VSO Case Number
VP230019776

IN RE: PETITION FOR RISK PROTECTION ORDER
AGAINST {Name of Respondent} _____

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF VOLUSIA

I, {full legal name} Jaron Martin, in my position as {job title} Deputy Sheriff with the {name of law enforcement officer/agency} Volusia Sheriff's Office, swear and affirm that the following facts are true and correct.

1. {Name of Respondent} _____ poses a significant danger of causing personal injury to himself/herself or others by having a firearm or any ammunition in his/her custody or control or by purchasing, possessing or receiving a firearm or any ammunition. The following specific statements, actions, or facts give rise to a reasonable fear of significant dangerous acts by the respondent:

BWC RECORDING
On 10/12/2023, at approximately 1233 hours, Deputy Martin responded to _____ Deltona, in reference to a suicidal person. Before deputies arrived on scene there was a message in CAD notes stating there was a suicide note, and the girlfriend took the gun. Upon arrival Deputy Martin met with _____ (V1), who advised the following:

1 Additional pages are attached.

2. {Name of Witness} _____ provided the following information based on his/her personal knowledge:

_____ advised her and her girlfriend _____ (R1) have been in a verbal argument over religion. _____ stated she wrote a letter to her kids stating she was leaving all her assets to them, such as her car, and Bank account. When _____ was asked how she felt when she was writing the letter _____ advised she was tired of everything and was ready to end everything.

_____ Additional pages are attached.

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AFFIDAVIT CONTINUATION

FROM SECTION 1
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Deputy Martin observed _____'s gun which was in a lock box, with one in the chamber and a loaded magazine. Deputy Martin took _____'s gun due to her feeling suicidal, which it was later submitted to District 4 evidence for safekeeping. Deputy Martin took digital photographs of where and how the firearm was found, which were later uploaded to the digital crime scene database.

Based on the totality of the circumstances, Deputy Martin determined there's substantial likelihood that without care or treatment, _____ would likely cause serious bodily harm to herself in the near future, as evidenced by her recent behavior. Therefore, _____ was placed into protective custody under the baker act guidelines. Deputy Martin secured _____ in handcuffs without incident.

It should also be noted that Deputy Martin completed a risk protection order for _____ due to a firearm being mentioned. While _____ was in custody for the baker act permission was given to deputies by _____ to take custody of her firearm.

3. Affiant is is not aware of any existing protection order governing the respondent under any applicable statute.

_____ Known protection orders are attached

4. The quantities, types, and locations of all firearms and ammunition the petitioner believes to be in the respondent's current ownership, possession, custody or control are as follows:

| | | | | | | |
|----------|----------|------|-------------------|----------|------------|-----------------|
| Quantity | <u>1</u> | Type | <u>Taurus G2S</u> | Location | <u>VSO</u> | <u>EVIDENCE</u> |
| Quantity | <u>7</u> | Type | <u>Ammunition</u> | Location | <u>VSO</u> | <u>EVIDENCE</u> |
| Quantity | _____ | Type | _____ | Location | _____ | _____ |
| Quantity | _____ | Type | _____ | Location | _____ | _____ |
| Quantity | _____ | Type | _____ | Location | _____ | _____ |
| Quantity | _____ | Type | _____ | Location | _____ | _____ |

_____ Additional pages are attached.

AFFIANT HEREBY CERTIFIES UNDER PENALTY OF PERJURY THAT THE STATEMENTS AND FACTS IN THIS AFFIDAVIT AND IN ANY ATTACHMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Dated: 10/12/2023 Signature of Affiant: *JM*

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 12 day of October, 2023, by D/S J. Martin 9503
Affiant's name

BE 9354
Signature of Attesting LEO Witness

D/S B. EDWARDS
Print name of Attesting LEO Witness

OR

Signature of Notary Public

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally known or Produced Identification

(Type of Identification Produced)